

DMV Lane Technician Observation Report

DMV Technician: <u>DAVE TAUBER</u>		Position: <u>1 or 2</u>	
Station: <u>Dover</u>		Date: <u>7-10-14</u> Time:	
Vehicle Make: <u> </u>		Model <u> </u> Year	
GVWR:	Fuel Type: <u>G</u>	Registration Number:	
Auditor: <u>Dossert</u>		Covert / <u>Overt</u> (circle one)	
		YES	NO
		N/A	
1. Did technician check vehicle paper work and verify VIN number?			
2. Was Emissions testing required?			
a) Was Emissions testing performed using OBD?			
b) Was Emissions testing performed using Analyzer Probe?			
c) Was Emissions testing performed using Paddle(s)?			
d) Was Emissions testing performed using Clip?			
3. Was Catalytic Converter inspection required?			
a) Was Catalytic Converter inspection performed?			
4. Was Fuel Tank pressure testing required?			
a) Was Fuel Tank pressure testing performed?			
5. Was Fuel Cap pressure testing required?			
a) Was Fuel Cap pressure testing performed?			
6. Is this test a Re-check from a prior failure?			
a) Which re-check test is being performed? 1 2 3 (circle one)			
b) If this is re-check #3, was repair paperwork verified for waiver?			
New Castle and Kent Counties Only			
7. Was Two-Speed Idle testing required?			
a) Was Two-Speed Idle testing performed?			
Sussex County Only			
8. Was Curb Idle testing required?			
a) Was Curb Idle testing performed?			
Comment: <u>* OUT FOR ENTIRE MONTH OF JULY *</u>			

DMV Lane Technician Observation Report

DMV Technician: <i>Stevie Weekes</i>		Position: <i>1</i> or 2	
Station: <i>Dover</i>	Date: <i>7-10-14</i>	Time: <i>1:32</i>	
Vehicle Make: <i>Ford</i>	Model: <i>Exc.</i>	Year: <i>2000</i>	
GVWR: <i>6980</i>	Fuel Type: <i>G</i>	Registration Number: <i>PC149726</i>	
Auditor: <i>Dossert</i>		Covert / Overt (circle one)	
		YES	NO
		N/A	
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?		<input checked="" type="checkbox"/>	
b) Was Emissions testing performed using Analyzer Probe?			<input checked="" type="checkbox"/>
c) Was Emissions testing performed using Paddle(s)?			<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?			<input checked="" type="checkbox"/>
3. Was Catalytic Converter inspection required?			<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?			<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?			<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)			<input checked="" type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?			<input checked="" type="checkbox"/>
New Castle and Kent Counties Only			
7. Was Two-Speed Idle testing required?			<input checked="" type="checkbox"/>
a) Was Two-Speed Idle testing performed?			<input checked="" type="checkbox"/>
Sussex County Only			
8. Was Curb Idle testing required?			<input checked="" type="checkbox"/>
a) Was Curb Idle testing performed?			<input checked="" type="checkbox"/>
Comment:			

DMV Lane Technician Observation Report

DMV Technician: <u>DARYL CONYERS</u>		Position: <u>1 or 2</u>	
Station: <u>DOVER</u>	Date: <u>7-10-14</u>	Time: <u>1:17</u>	
Vehicle Make: <u>BUICK</u>	Model: <u>CENTURY</u>	Year: <u>1995</u>	
GVWR:	Fuel Type: <u>G</u>	Registration Number: <u>332812</u>	
Auditor: <u>DOSSERT</u>	Covert / <u>Overt</u> (circle one)		

	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	✓		
2. Was Emissions testing required?	✓		
a) Was Emissions testing performed using OBD?		✓	
b) Was Emissions testing performed using Analyzer Probe?	✓		
c) Was Emissions testing performed using Paddle(s)?	✓		
d) Was Emissions testing performed using Clip?		✓	
3. Was Catalytic Converter inspection required?	✓		
a) Was Catalytic Converter inspection performed?	✓		
4. Was Fuel Tank pressure testing required?	✓		
* a) Was Fuel Tank pressure testing performed?		✓	
5. Was Fuel Cap pressure testing required?	✓		
a) Was Fuel Cap pressure testing performed?	✓		
6. Is this test a Re-check from a prior failure?		✓	
a) Which re-check test is being performed? 1 2 3 (circle one)			✓
b) If this is re-check #3, was repair paperwork verified for waiver?			✓
New Castle and Kent Counties Only			
7. Was Two-Speed Idle testing required?	✓		
a) Was Two-Speed Idle testing performed?	✓		
Sussex County Only			
8. Was Curb Idle testing required?		✓	
a) Was Curb Idle testing performed?			✓
Comment:			
<u>DARYL PERFORMED FULL INSP.</u>			
<u>* HARD LINE - UNABLE TO PERFORM TANK TEST</u>			

DMV Lane Technician Observation Report

DMV Technician: <u>Steve Glover</u>		Position: <u>1</u> or 2	
Station: <u>Dover</u>	Date: <u>7-10-14</u>	Time: <u>1:03</u>	
Vehicle Make: <u>TOYOTA</u>	Model: <u>HIGHLANDER</u>	Year: <u>2006</u>	
GVWR: <u>4720</u>	Fuel Type: <u>G</u>	Registration Number: <u>W008758</u>	
Auditor: <u>Dossett</u>			
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		<input checked="" type="checkbox"/>	
2. Was Emissions testing required?		<input checked="" type="checkbox"/>	
a) Was Emissions testing performed using OBD?		<input checked="" type="checkbox"/>	
b) Was Emissions testing performed using Analyzer Probe?			<input checked="" type="checkbox"/>
c) Was Emissions testing performed using Paddle(s)?			<input checked="" type="checkbox"/>
d) Was Emissions testing performed using Clip?			<input checked="" type="checkbox"/>
3. Was Catalytic Converter inspection required?			<input checked="" type="checkbox"/>
a) Was Catalytic Converter inspection performed?			<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?			<input checked="" type="checkbox"/>
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?			<input checked="" type="checkbox"/>
a) Which re-check test is being performed? 1 2 3 (circle one)			<input checked="" type="checkbox"/>
b) If this is re-check #3, was repair paperwork verified for waiver?			<input checked="" type="checkbox"/>
Sussex County Only			
7. Was Curb Idle testing required?			<input checked="" type="checkbox"/>
a) Was Curb Idle testing performed?			<input checked="" type="checkbox"/>
Comment:			
<u>TITLE CHANGE / NJ TITLE</u>			

Original 08/06/2009/TMP

DMV Lane Technician Observation Report

DMV Technician: <u>DONALD HAMMLER</u>		Position: <u>1</u> or 2	
Station: <u>Dover</u>	Date: <u>7-10-14</u>	Time: <u>2:00pm</u>	
Vehicle Make: <u>CHRYSLER</u>	Model: <u>PACIFICA</u>	Year: <u>2006</u>	
GVWR: <u>5700</u>	Fuel Type: <u>G</u>	Registration Number: <u>VN72898</u>	
Auditor: <u>DOSSERT</u>			
	YES	NO	N/A
1. Did technician check vehicle paper work and verify VIN number?	<input checked="" type="checkbox"/>		
2. Was Emissions testing required?	<input checked="" type="checkbox"/>		
a) Was Emissions testing performed using OBD?	<input checked="" type="checkbox"/>		
b) Was Emissions testing performed using Analyzer Probe?		<input checked="" type="checkbox"/>	
c) Was Emissions testing performed using Paddle(s)?		<input checked="" type="checkbox"/>	
d) Was Emissions testing performed using Clip?		<input checked="" type="checkbox"/>	
3. Was Catalytic Converter inspection required?		<input checked="" type="checkbox"/>	
a) Was Catalytic Converter inspection performed?			<input checked="" type="checkbox"/>
4. Was Fuel Tank pressure testing required?		<input checked="" type="checkbox"/>	
a) Was Fuel Tank pressure testing performed?			<input checked="" type="checkbox"/>
5. Was Fuel Cap pressure testing required?		<input checked="" type="checkbox"/>	
a) Was Fuel Cap pressure testing performed?			<input checked="" type="checkbox"/>
6. Is this test a Re-check from a prior failure?			
a) Which re-check test is being performed? 1 2 3 (circle one)		<input checked="" type="checkbox"/>	
b) If this is re-check #3, was repair paperwork verified for waiver?			<input checked="" type="checkbox"/>
Sussex County Only			
7. Was Curb Idle testing required?		<input checked="" type="checkbox"/>	
a) Was Curb Idle testing performed?			<input checked="" type="checkbox"/>
Comment:			

Original 08/06/2009/TMP

DMV Lane Technician Observation Report

DMV Technician: <u>Tom Deas</u>		Position: <u>Cor 2</u>	
Station: <u>Dover</u>	Date: <u>7-10-14</u>	Time: <u>2:00 PM</u>	
Vehicle Make: <u>Toyota</u>	Model: <u>Tacoma</u>	Year: <u>2007</u>	
GVWR: <u>5490</u>	Fuel Type: <u>G</u>	Registration Number: <u>CL85817</u>	
Auditor: <u>Dossert</u>			
		YES	NO
1. Did technician check vehicle paper work and verify VIN number?		✓	
2. Was Emissions testing required?		✓	
a) Was Emissions testing performed using OBD?		✓	
b) Was Emissions testing performed using Analyzer Probe?			✓
c) Was Emissions testing performed using Paddle(s)?			✓
d) Was Emissions testing performed using Clip?			✓
3. Was Catalytic Converter inspection required?			✓
a) Was Catalytic Converter inspection performed?			✓
4. Was Fuel Tank pressure testing required?			✓
a) Was Fuel Tank pressure testing performed?			✓
5. Was Fuel Cap pressure testing required?			✓
a) Was Fuel Cap pressure testing performed?			✓
6. Is this test a Re-check from a prior failure?			✓
a) Which re-check test is being performed? 1 2 3 (circle one)			✓
b) If this is re-check #3, was repair paperwork verified for waiver?			✓
Sussex County Only			
7. Was Curb Idle testing required?			✓
a) Was Curb Idle testing performed?			✓
Comment:			

Original 08/06/2009/TMP